KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test: (See					(See Instruc	e Instructions on Reverse Side)			" 115-075-20416-0000					
Open Flow					Test Date: 8/3/2010				API No. 15-075-20,4/6					
D	ellvers	iblity /	\frown		1001 041	د رحی	1/201	0	0	1110. 15 -15	~ ~~ ,***			
Company WANNA M				Lease TNGE			-				Well Number			
County	1 -			ation	Section		TWP		RNG (I	<u></u>		<u>-</u>	Attributed	
	MAM)	ILT	on)	V E			245		41	····				
Fletd	100	7 C	ديملا		Reservoi . سال الما					athering Conr	rection E/d Se	- 0		
Completion Date				VINFIELD Plug Back Total Depth				Packer		E/O DE	CYIC	.es		
6	ءر ا	-//	1989											
Casing S			Wei		Internal		Set a		Perf	orations	To			
4.500 10.500				4.052 Internal Diameter		2970'		2395 '		<u>'</u> 2	2308'			
Tubing Size Weight 2. 375 4. 700					Jiameter 95	Set at 3406'		Peri	orations	То				
Type Cor				100		d Production		06	Pump↓	Init or Traveling	Plunger?	Yes / No	 -	
ËS,	na	/E	-GAS			IT WAT			P	'	g ·g			
Producin	g Thru	ı (An	nulus / Tubi	ng)	% (arbon Dioxi	ide		% Nitro	gen	Ga	Gravity -	G,	
	951		,											
Vertical E	peptnt	H)				_	sure Taps				(Me	iter Run) (Prover) Size	
				1/4		FIA	nhe		<u> </u>	· · · · · ·		-		
Pressure	Bulldo	ıb:	Shut in _E	2	10 / Q _ at	5:10	(AM)(PM)	Taken	8/3	20	10 at _&	5.20	(PM)	
Well on L	ine:		Started	2	0 at		(AM) (PM)	Taken		20	at		(AM) (PM)	
				<u></u>										
<u></u>			Circle one		 -	OBSERVE	D SURFACE				Duration of S	hut-in	Hours	
Static / Orific Dynamic Size Property (Inches		lice Meter		Pressure Differential	Pressure Flowing Differential Temperature		Casing Wellhead Pressure		Tubing Wellhead Pressure		Duration	Liqu	Liquid Produced	
		i Prover Prec			t t	t temperature	(P _w) or (P _t) or (P _e)		(P _w) or (P _t) or (P _a)		(Hours)		(Barrels)	
Shut-In			bad (i.i.	ALCHES FI ₂ O	·		psig	psia	psig	psfa				
<u> </u>							147							
Flow							<u> </u>		<u> </u>					
						FLOW STR	EAM ATTRI	BUTES	_	,				
1 1,91 1. b.			Circle one: Meter or	Press	Grav	ity _	Flowing	Deviation		Metered Flov	v . G	OR	Flowing	
		Prover Pressure		Extension Pxh	Fact F _a	or	Temperature Factor		ctor	R		Feet/	Fluid Gravity	
Mcfd			psla —————	, m^,,			F,,		pv	(Mcfd)	Dig.	rrel)	G _m	
							•	1						
					(OPEN FLO	W) (DELIVE	ERABILITY)	CALCUL	ATIONS	<u> </u>				
(P _c) ² =		:	(P_)² =	:	P _d = _	9/	•	- 14.4) +		,		P _a) ² = 0.2 P _a) ² =	207	
		_		Choose formula 1 or 2:	1		T	ure Curve			··········			
(P _c) ² - (P _n) ²				1. P _e z-P _e z	formula		Slope ⇒ *n		n x	LOG	A - A 71		Open Flow Deliverability	
or (P _e)² - (P)2			2. P. *- P. *	1, or 2. and divide	P.*- P.*	Assi			1 11	Antilog	Equals	R x Antilog	
<u>:</u>				d'Mded by: P.2 - P.2	by:	<u> </u>	Standar	d Slope	_				(Mcfd)	
]	-	
Open Flow				Mcfd @ 14.65 psia			Deliverability		Mcfd ⊕ 14.65 psia					
								<u> </u>						
				n behalf of the (1	e above repor	t and that he	has know	ledge of	
he facts sta	ated th	erein	, and that s	aid report is true	and correct.	Executed t	this the	4 th 9	lay of 1	DECEMB	ER		20 10	
					·			3/		(0=	$A \leftarrow A$	1		
			Wimess (I	f any)			_,	1 V QZ	LALA	For C o	MOBILY XXXX			
	_		Eas Co-	-								RF	CENED	
			For Comm	HBBION						Check	ed by	*****	~~! A <u> </u>	

DEC 17 2010

I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request exempt status under Rule K.A.R. 82-3-304 on behalf of the operator
(Check one) is a coalbed methane producer is cycled on plunger lift due to water is a source of natural gas for injection into an oil reservoir undergoing ER is on vacuum at the present time; KCC approval Docket No
I further agree to supply to the best of my ability any and all supporting documents deemed by Commission staff as necessary to corroborate this claim for exemption from testing.
Date: 12/14/2010_
Signature: Manda on Smilk Title: Luxue

Instructions:

If a gas well meets one of the eligibility criteria set out in KCC regulation K.A.R. 82-3-304, the operator may complete the statement provided above in order to claim exempt status for the gas well.

At some point during the current calendar year, wellhead shut-in pressure shall have been measured after a minimum of 24 hours shut-in/buildup time and shall be reported on the front side of this form under **OBSERVED SURFACE DATA**. Shut-in pressure shall thereafter be reported yearly in the same manner for so long as the gas well continues to meet the eligibility criterion or until the claim of eligibility for exemption IS denied.

The G-2 form conveying the newest shut-in pressure reading shall be filed with the Wichita office no later than December 31 of the year for which it's intended to acquire exempt status for the subject well. The form must be signed and dated on the front side as though it was a verified report of annual test results.